THOMAS SZASZ

Soviet psychiatry: Its supporters in the West

THE CURRENTLY POPULAR protest against Soviet psychiatric abuses is not only a flagrant case of selective indignation; it is, insofar as prominent American psychiatrists and the American Psychiatric Association (APA) are concerned, also a case of crass hypocrisy. Since the late 1960s, many leading American psychiatrists as well as the APA have heaped praise on the Soviet mental health system and on several leading Russian psychiatric criminals. I propose to exhume this body of American (and British) support for Soviet psychiatry and use it, much as a pathologist might use a corpse, to establish the fact that Western psychiatric totalitarians share with their Soviet colleagues the responsibility for Russian psychiatric repressions.

Western awareness of, and concern with, psychiatric abuses in the Soviet Union began in 1965, with the publication in Britain of Valery Tarsis's *Ward 7*, a thinly disguised autobiographical novel setting forth the psychiatric persecution, incarceration, and torture of a writer critical of the Soviet system. The title of Tarsis's book (still probably the best account of Soviet psychiatry that we have) was carefully chosen to alert the reader to the fundamental similarities between Soviet psychiatry as he exposes it and Czarist psychiatry as Anton Chekhov exposed it in 1892 in his story, "Ward No. 6." Nevertheless, the Western press and Western psychiatrists have stubbornly ignored the historical continuity characteristic of institutional psychiatry throughout the world. Tarsis recognized that the real enemy was psychiatric power, wherever it existed and whatever shape it assumed. The result of his book, however, was the unleashing of a journalistic and professional criticism of coercive psychiatry that is, in fact, doubly selective: It is aimed only at Russian psychiatry and ignores the parallel problems and practices in Western countries; and it is aimed only at protecting so-called "sane intellectuals" or "political dissidents" from psychiatric imprisonment and torture, and ignores the predicament of "insane nonintellectuals" or "nonpolitical dissidents" subjected to identical persecutions and punishments. I shall remark on each of these matters presently. Before doing so, however, I want to deliver the exhumed body I promised.

IN THE NOVEMBER 1969 ISSUE OF the *International Journal of Psychiatry*, Mike Gorman, then the celebrated executive director of the National Committee Against Mental Illness, published a report entitled "Soviet Psychiatry and the Russian Citizen." To call Gorman's article adulatory would be an understatement. A single quotation from it should suffice to illustrate his views: "Leaving aside the paramount virtue of a psychiatric system that brings a high quality of care to all those in trouble without any invidious economic distinctions,it is my considered opinion that the tailoring of psychiatric care in all kinds of settings—in the school, in the factory, in the dispensary, in the emergency services, in the home—to the individual needs of each patient is the crowning achievement of Soviet psychiatry."

Gorman's own crowning achievement as a mental health propagandist was, of course, that in listing all the "settings" in which Russian psychiatrists dispense their cures, he managed to omit the two most important ones: the courtroom and the psychiatric concentration camp called "special hospital." In addition, it was no doubt also an achievement, testifying to Gorman's own mental health, that he could sleep at night while deliberately covering up for the crimes of the psychiatric Robespierres and Marats of his beloved Soviet mental health system.

Accompanying Gorman's article was a "critical evaluation" of it by Zigmond Lebensohn, a card-carrying institutional psychiatrist and longtime spokesman for APA policies. "As a Gorman-watcher of many years standing," wrote Lebensohn, "I read his paper and could hardly believe my eyes! Gone were the sharp barbs and telling innuendoes, which have characterized so many of his diatribes on practically all aspects of psychiatry in the United States. Instead, we find him in a mellow and expansive mood, describing Soviet psychiatry in roseate terms with enthusiasm, eulogy, and panegyrics."

In the late 1960s, Gorman was, of course, articulating the then "correct" American psychiatric position on Russian psychiatry. His voice was in perfect harmony with the views of leading American psychiatrists and the APA. For example, in 1968 Dr. Ari Kiev, a recognized expert on Soviet psychiatry, edited and contributed two chapters to a book entitled *Psychiatry in the Communist World*, in which there is not a single reference, however oblique, to the psychiatric incarceration of political dissenters. (Both the Tarsis case and the case of General Grigorenko had at that time already been widely reported in the newspapers.) In 1969, Dr. Kiev published an article in the magazine *Attitude* reviewing Soviet psychiatric theory and practice, again without any reference to psychiatric abuses.

I SHOULD LIKE TO PAUSE HERE IN my presentation of the evidence against American psychiatry's posture vis-à-vis Soviet psychiatry and note that, even before 1970, the American mental-health establishment's hypocrisy on this subject was glaringly obvious. When American newspapermen then looked at Soviet psychiatry, they saw its horrors clearly and reported them honestly. In December 1969, for example, *Time* magazine ran a piece entitled "Dissent = Insanity," reporting on General Grigorenko's psychiatric persecution. On February 2, 1970, *Parade* magazine published a long essay by Lloyd Shearer denouncing Soviet psychiatric atrocities. However, when American psychiatrists and mental health experts looked at the same scene, all they saw was a Russian psychiatric paradise, which Americans could not emulate fast enough.

That the Soviet Union is a police state is too simple for observers of the political and psychiatric scene to admit.

To appreciate fully the APA's support of Soviet psychiatric practices, it is necessary now to name two of the leading Soviet psychiatrists responsible for them. The highest-ranking, best-known, and most influential psychiatrist in the Soviet Union is Professor Andrei V. Snezhnevsky, director of the Institute of Psychiatry of the Academy of Medical Sciences. All Russian critics of Soviet psychiatry identify Snezhnevsky as the person most responsible for the psychiatric persecution of dissidents. In 1970, at the annual meeting of the APA held in San Francisco, the association honored Snezhnevsky by naming him a "distin-

THOMAS SZASZ, professor of psychiatry at the Upstate Medical Center, Syracuse, New York, is the author of Psychiatric Slavery *and* The Theology of Medicine.

guished fellow" for his "outstanding contribution to psychiatry and related sciences." Also named as a "distinguished fellow" was Dr. Boris Lebedev, the director of the World Health Organization's project on "Psychiatric Diagnosis, Classification, and Statistics," who has also been identified as a leading figure in the psychiatric disposition of dissidents.

Viewed against this background, it is not surprising that something less than resounding success has met the efforts of some groups to secure the condemnation of Soviet psychiatric abuses by official Western psychiatric bodies. One of the earliest such attempts was a January 1971 report by a committee of the Canadian Psychiatric Association, which condemned "the alleged wrongful detention in mental hospitals in the USSR of seemingly healthy individuals whose views and attitudes are in conflict with those of the regime." That report became the nucleus of a more broadly based effort to pass a resolution at the fifth congress of the World Psychiatric Association (WPA), meeting in Mexico City in November 1971. The attempt was foiled by the Russian and pro-Russian forces in the WPA, led by its secretary-general, the British psychiatrist Dr. Denis Leigh, whose concluding report declared: "Nowhere in the statutes is there any mention of the WPA making itself responsible for the ethical aspects of psychiatry."

DR. LEIGH DID NOT HAVE LONG to wait for his reward for that intervention. The following year, both Dr. Leigh and Professor Linford Rees, the treasurer of the WPA, were made honorary members of the All-Union Society of Neurologists and Psychiatrists. According to Sidney Bloch and Peter Reddaway (about whose book *Psychiatric Terror* more later), Leigh at that time asserted "that in his opinion the campaign against Soviet abuse was a sophisticated and expensively organized operation, with CIA participation; that he doubted the authenticity of the evidence; and that [Vladimir] Bukovsky [one of the psychiatrically incarcerated dissidents] was indeed a schizophrenic, or at any rate had a history of the condition." Professor Snezhnevsky concurred: "It [the attempt to condemn alleged Soviet psychiatric abuses] is a 'cold war' maneuver carried out by expert hands."

In 1973, in an interview in the *Observer*, Leigh explained his position in this way: "We [the WPA] are not concerned with political matters. . . . Schizophrenia is the most important topic in psychiatry. It's the scourge of the world. The Russians have about 200 people researching on it and they have a good chance of solving it. That's all there is to it."

Sean MacBride, chairman of Amnesty International at the time, supported Leigh and the Russians, declaring: "I think there has been a good deal of exaggeration in the foreign press reports in regard to the extent, if any, to which psychiatric hospitals are being used in dealing with political prisoners."

During the years since then, the popular as well as the psychiatric press have continued their campaign of selective indignation and protest. Typically, articles in the popular press would condemn Soviet emigration policies preventing Russian Jews from leaving the country; the writers of such articles must believe that it is quite proper for the Soviet government to prevent Russian Christians from leaving their country. Similarly, articles in both the popular press and in psychiatric journals would condemn Soviet mental health policies preventing Russian dissidents from leaving mental hospitals; the writers of such articles must likewise believe that it is quite proper for the Soviet government to prevent Russian nondissidents from leaving mental hospitals. That the Soviet Union is a police state—that it is, as it were, one big prison, concentration camp, or mental hospital—is a fact at once too simple, obvious, and unpalatable for many observers of the contemporary political and psychiatric scene to admit.

At long last, on September 1, 1977, Western psychiatry won a Pyrrhic victory over Soviet psychiatry. At the sixth congress of the WPA, meeting in Honolulu, the British Royal College of Psychiatrists introduced a resolution condemning "the systematic abuse of psychiatry for political purposes in the USSR." The General Assembly of the WPA passed that resolution by a vote of 90 to 88.

*IN AUGUST 1977, I WAS ON A LEC*ture tour in Australia. Anticipating just such an outcome in the tragi-comic struggle between the forces of psychiatric good and evil, I repeatedly called attention to the basic similarities between institutional psychiatry on both sides of the Iron Curtain. After the resounding victory of the forces of good over evil in Honolulu, Frank Knöpfelmacher, professor of psychology at Melbourne University, offered the following comments on the crucial similarities, and differences, between the political-psychiatric situation in Russia and America:

> In a strict sense there is not much difference between Soviet and American psychiatry in terms of moral rectitude and intellectual probity, as Szasz was fully justified in pointing out. As professions, they are both much of a muchness. This may very well be the reason why the Western psychiatric profession showed its now notorious reluctance to condemn Soviet psychiatry, and why they had to be shamed from without, sometimes by the most elaborate methods, to "protest." The difference between our own and Soviet uses of psychiatry lies elsewhere.
>
> It is a very complex difference but its gist can be indicated thus. Unlike General Grigorenko and the psychiatrist Gluzman, who revealed the uses of Soviet psychiatry, Senator Goldwater and Thomas Szasz are not in concentration camps. And they certainly do not depend for their physical survival on pleas and protests from the psychiatrists of the Serbsky Institute [one of the notorious Soviet "special hospitals"].

However obvious they might be, certain elementary facts about Soviet society must be stated and restated, lest one succumb to the temptation to engage in the debate between Soviet psychiatrists and their Western critics on their own false terms. Russia is a closed society: One cannot leave it at will. In Russia, the state is the psychiatrist's only employer: Soviet psychiatrists work for the state—or get out (if they can), or get locked up (as insane). In Russia, rejecting the moral and political principles of Marxism and Communism is regarded as a characteristic symptom of schizophrenia; the Russian psychiatrist may be quite "sincere" in believing that dissidents are demented.

It is clear, then, that from a libertarian viewpoint the line between the Soviet uses and abuses of psychiatry is an invisible one. *All* of Soviet psychiatry is an instrument of the political power of the Soviet state, just as *most* of our psychiatry is an instrument of the political power of the American state. Wrenching analyses of psychiatric practices out of their historical, economic, and political contexts is an exercise not only in futility but also in foolishness. Precisely such an exercise is *Psychiatric Terror*, by Sidney Bloch and Peter Reddaway, which I shall review in my next column.

Forthcoming in

INQUIRY

- *Victor Marchetti reviews Frank Snepp's* Decent Interval
- *Earl C. Ravenal on Carter's human rights policy*